

| PATENT APPLICATION FEE DETERMINATION RECORD   |  |                 |                                    |              | Application or Docket Number<br><i>715272</i> |           |                     |  |
|---|--|-----------------|------------------------------------|--------------|---|-----------|---------------------|--|
| CLAIMS AS FILED - PART I  |  |                 |                                    |              | SMALL ENTITY OR OTHER THAN SMALL ENTITY       |           |                     |  |
| (Column 1)  |  |                 | (Column 2)                         |              |   |           |                     |  |
| FOR   |  | NUMBER FILED    |                                    | NUMBER EXTRA |   | RATE FEE  |                     |  |
| BASIC FEE   |  |                 |                                    |              |   | \$ 315.00 |                     |  |
| TOTAL CLAIMS  |  | 16 minus 20 = * |                                    |              |   | x \$10 =  |                     |  |
| INDEPENDENT CLAIMS  |  | 8 minus 3 = *   |                                    | 5            |   | x 30 =    |                     |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |                 |                                    |              | + 100 =                                       |           | + 200 =             |  |
|   |  |                 |                                    |              | TOTAL   |           | TOTAL <i>930</i>    |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |                 |                                    |              |   |           |                     |  |
| CLAIMS AS AMENDED - PART II   |  |                 |                                    |              | SMALL ENTITY OR OTHER THAN SMALL ENTITY       |           |                     |  |
| (Column 1)  |  |                 | (Column 2)                         |              | (Column 3)                                    |           |                     |  |
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT               |                 | HIGHEST NUMBER PREVIOUSLY PAID FOR |              | PRESENT EXTRA                                 |           | RATE ADDITIONAL FEE |  |
|   | Total  | *               | Minus                              | **           | =   | x \$10 =  |                     |  |
|   | Independent                                    | *               | Minus                              | ***          | =   | x 30 =    |                     |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                 |                                    |              |   | + 100 =   |                     |  |
|   |  |                 |                                    |              | TOTAL ADDIT. FEE                              |           | TOTAL ADDIT. FEE    |  |
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT               |                 | HIGHEST NUMBER PREVIOUSLY PAID FOR |              | PRESENT EXTRA                                 |           | RATE ADDITIONAL FEE |  |
|   | Total  | *               | Minus                              | **           | =   | x \$10 =  |                     |  |
|   | Independent                                    | *               | Minus                              | ***          | =   | x 30 =    |                     |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                 |                                    |              |   | + 100 =   |                     |  |
|   |  |                 |                                    |              | TOTAL ADDIT. FEE                              |           | TOTAL ADDIT. FEE    |  |
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT               |                 | HIGHEST NUMBER PREVIOUSLY PAID FOR |              | PRESENT EXTRA                                 |           | RATE ADDITIONAL FEE |  |
|   | Total  | *               | Minus                              | **           | =   | x \$10 =  |                     |  |
|   | Independent                                    | *               | Minus                              | ***          | =   | x 30 =    |                     |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                 |                                    |              |   | + 100 =   |                     |  |
|   |  |                 |                                    |              | TOTAL ADDIT. FEE                              |           | TOTAL ADDIT. FEE    |  |
| <p>* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</p> <p>** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". ADDIT. FEE</p> <p>*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".</p> <p>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</p> |  |                 |                                    |              |   |           |                     |  |